UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549



FORM D

OMB APPROVAL
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Expires: April 30, 2008
Estimated average burden
hours per response......16.00

	NOTICE OF SALE OF SECURITIES
	PURSUANT TO REGULATION D,
	SECTION 4(6), AND/OR
UNI	FORM LIMITED OFFERING EXEMPTION

SEC USE ONLY						
Prefix		Serial				
DAT	E RECEIN	/ED				

Name of Offering ([] check if this is an amendment and name h Guardian Te	as changed, and indicechnologies Inte	- ·		•
Filing Under (Check box(es) that apply): [] Rule 504 Type of Filing: [X] New Filing [] Amendment	[] Rule 505	[X] Rule 506	[] Section 4(6)	[] ULOE SEC Mail Processing Section
A. BAS	IC IDENTIFICATIO	ON DATA		MAR 1 Y ZUDB
1. Enter the information requested about the issuer			l	Nashington, DC
Name of Issuer ([] check if this is an amendment and name has cl Guardian Te	hanged, and indicate o echnologies Inte			•
Address of Executive Offices (Number and Street, City, State, Zip 516 Herndon Parkway, Suite A, Herndon, Virgin			elephone Number (Inc 703) 464-5495	cluding Area Code)
Address of Principal Business Operations (Number and S (If different from Executive Offices) Same as above.	Street, City, State, Zip		elephone Number (In Same as above.	cluding Area Code)
Brief Description of Business Healthcare and aviation security technology solu	tions software d	leveloper.	PR	OCESSED
Type of Business Organization [X] corporation [] limited partnership, already [] business trust [] limited partnership, to be for		[] other (please s	pecify): EMA	OCESSED R 2 5 2008 OMSON
Actual or Estimated Date of Incorporation or Organization: Jurisdiction of Incorporation or Organization: (Enter two-letter U.S CN for Canada; FN for oth GENERAL INSTRUCTIONS		viation for State:	[] Estimated	CUCIAL

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to this notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice.

SEC 1972 (6-02)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer.
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	[] Promoter	[X] Beneficial Owner	[X] Executive Officer	[X] Director	[] General and/or Managing Partner
Full Name (Last name first, if in	dividual) Tr	ıdnak, Michael W.			
Business or Residence Address of 516 Herndon Parkway,	•				
Check Box(es) that Apply:	[] Promoter	[] Beneficial Owner	[X] Executive Officer	[X] Director	[] General and/or Managing Partner
Full Name (Last name first, if in	dividual) Do	novan, William J.			
Business or Residence Address of 516 Herndon Parkway,	•	•			
Check Box(es) that Apply:	[] Promoter	[] Beneficial Owner	[] Executive Officer	[X] Director	[] General and/or Managing Partner
Full Name (Last name first, if in	dividual) Na	sh, Charles T.			
Business or Residence Address (516 Herndon Parkway,					
Check Box(es) that Apply:	[] Promoter	[] Beneficial Owner	[] Executive Officer	[X] Director	[] General and/or Managing Partner
Full Name (Last name first, if in	dividual) Ke	nnedy, Sean W.			· · · · · · · · · · · · · · · · · · ·
Business or Residence Ad 516 Herndon Parkway,	•		-		, 1
Check Box(es) that Apply:	[] Promoter	[] Beneficial Owner	[X] Executive Officer	[] Director	[] General and/or Managing Partner
Full Name (Last name first, if in	dividual) Ha	re, Gregory E. Har	e		
Business or Residence Address (Number and Stre	eet, City, State, Zip Code)			
516 Herndon Parkway,	Suite A, He	rndon, Virginia 20	170		
Check Box(es) that Apply:	[] Promoter	[] Beneficial Owner	[] Executive Officer	[X] Director	[] General and/or Managing Partner
Full Name (Last name first, if in-	dividual) (Grandizio, Henry A			

Check Box(es) that Apply:	[] Promoter	[] Beneficial Owner	[] Executive Officer	[X] Director	[]	General and/or Managing Partner
Full Name (Last name first, if	individual)	Polillo, Ronald R.				
Business or Residence Addres 516 Herndon Parkway	•					
·						
Check Box(es) that Apply;	[] Promoter	[] Beneficial Owner	[] Executive Officer	[] Director	[]	General and/or Managing Partner
Check Box(es) that Apply: Full Name (Last name first, if		[] Beneficial Owner	[] Executive Officer	[] Director	[]	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

					B. INI	ORMATIC	N ABOUT	OFFERING	j			•	
1. Has t	the issuer so	old, or does	the issuer					s offering?			Ye	es []	No[X]
								if filing unde					
2. Wha	t is the min	imum inves	stment that	will be acc	epted from	any individu	al?		·····		<u> </u>	No Mini	
				•	-			•••••				s[X]	No []
or similisted is the brok	lar remune an associa ker or deale	ration for s ted person er. If more	solicitation or agent of	of purchas a broker or 5) persons	ers in conn dealer regi	ection with a stered with t	sales of sec he SEC and	n, directly or urities in the /or with a sta of such a bro	offering, If	a pers	on to be name of		
Full Na	me (Last na	ame first, if	individual)								•	
Busines	s or Reside	nce Addre	ss (Number	and Street	City, State	, Zip Code)						·	
Name o	f Associate	d Broker o	r Dealer										
						it Purchasers				ſ] All State	••	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	 [FL]	[G/	•	.5	[ID]
[IL]	[IN]	[IA]	(KS)	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[M		1	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OH		'	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[wv]	[W]			[PR]
Full Na	me (Last na	ame first, if	individual))									
Busines	s or Reside	nce Addres	ss (Number	and Street,	City, State	, Zip Code)				•			
Name o	f Associate	d Broker o	r Dealer										
						it Purchasers			·	1] All State	·	
(AL)	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]			[GA]	 [HI]	(ID)
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]			[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[ОН]		[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	•	[Wi]	[WY]	[PR]
Full Na	me (Last na	ıme first, if	individual)										
Busines	s or Reside	nce Addres	s (Number	and Street,	City, State	, Zip Code)							
Name o	f Associate	d Broker o	r Dealer									······	
			Has Solici Individual S			it Purchasers				ſ] All State	s	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	- [ID]	
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]		[MO]	ì
[MT]	[NE]	[NV]	(NH)	[IN]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[YT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	

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T.	OFFFRING PRICE	NUMBER	M INVESTORS	FXPFNSFS	AND USE (IK PROCEKT

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box [] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
Type of Security	Aggregate Offering Price	Amount Already Sold
Debt (Promissory Note)	\$0	\$0
Equity common stock and units consisting of common stock and common stock purchase warrants	\$8,210,056.00	\$1,110,056.00
Common stock issued as compensation for services rendered	Services	Services
[X] Common [] Preferred		
(A) Common [] Protected		
Convertible Securities (including warrants)	Services/Other	Services/Other
Warrants to purchase common stock issued as compensation for services rendered and to extend note		1-2
Partnership Interests	\$ 0	\$0
Other (Specify)	\$0	\$0
Total	\$8,210,056.00	\$1,110,056.00
Answer also in Appendix, Column 3, if filing under ULOE.		
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
Asserting Insurance	9	\$1,110,056.00/
Accredited Investors		Services
Non-accredited Investors	0	\$0
Total (for filings under Rule 504 only)	0	\$0
Answer also in Appendix, Column 4, if filing under ULOE.		
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		
	Type of Security	Dollar Amount
Type of offering	Type of Security	Sold
Rule 505		\$
Regulation A		<u>\$</u>
Rule 504		\$
		<u> </u>
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		•
Transfer Agent's Fees] \$	<u> </u>
_	} \$	
Legal Fees	X]\$ 2,000.00	
Accounting Fees.] \$	
Engineering Fees		
Sales Commissions (specify finder's fees separately)	3.6	

Other Expenses (identify)		[] \$	
Escrow Agent's fees	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	[] \$	
Total		00	
Enter the difference between the aggregate offering price g tenses furnished in response to Part C - Question 4.a. ter."	This difference is the "adjusted gross proce	seds to the \$8,208,	056.00
purposes shown. If the amount for any purpose is not know the estimate. The total of the payments listed must equal ponse to Part C - Question 4.b above.	wn, furnish an estimate and check the box to the	he left	
		Payments to Officers, Directors, & Affiliates	Payments To Others
		[V] \$ 1 170 000 00	
Salaries and fees			
Purchase of real estate.		[]\$	[]8
Purchase, rental or leasing and installation of machinery and equipment		[]\$	[]\$
Construction or leasing of plant buildings and facilities			[]\$
Acquisition of other businesses (including the value of			
securities involved in this offering that may be used in exchange for the assets or securities of another issuer			
pursuant to a merger)		[]\$	[]\$
Repayment of indebtedness			[]\$
Working capital (not specifically identified)			
Other (specify):		[]\$	
Rent		[] s	[X] \$ <u>340,000.0</u>
Insurance		[]\$	
Consultants, Legal, Accounting		[]\$	
Column Totals		[X] \$ 1,170,000	. –
Total Payments Listed (column totals added)		<u>\$_8,20</u>	<u>8,056.00</u>
· · · · · · · · · · · · · · · · · · ·	D. FEDERAL SIGNATURE		
e issuer has duly caused this notice to be signed by the una stitutes an undertaking by the issuer to furnish to the U	J.S. Securities and Exchange Commission, up		
nished by the issuer to any non-accredited investor pursuar	it to paragraph (b)(2) of Rule 302.		
uer (Print or Type)	Signature	Date	
uardian Technologies International, Inc.	Longony Home	March 10, 2008	
me of Signer (Print or Type)	Title of Signer (Print or Type)		
egory E. Hare	Chief Financial Officer		
	ATTENTION		 1
	ATTENTION	Wann (Can 4011 C C 4	004.1
intentional misstatements or omission	s of fact constitute federal criminal viola	iuons. (5ee 18 U.S.C. 1	UV 1.)

